

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **Attorney Docket Number** MCA-474 **DECLARATION FOR UTILITY OR First Named Inventor** MOYA, Wilson **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION **Application Number** (37 CFR 1.63) Filing Date Declaration Declaration Group Art Unit OR Submitted Submitted after Initial Filing (surcharge with Initial **Examiner Name** (37 CFR 1.16 (e)) Filing required)

| As a below named inventor, I hereby declare   |                             |                               |   |                          |  |  |  |  |  |  |
|---|-----------------------------|-------------------------------|---|--------------------------|--|--|--|--|--|--|
| My residence, post office address, and citizenship are as stated below next to my name.   |                             |                               |   |                          |  |  |  |  |  |  |
| I believe I am the original, first and names are listed below) of the subject PATTERNED POROUS  | ect matter which is claimed | ,                             |   | * *                      |  |  |  |  |  |  |
| the specification of which (Title of the Investion)   |                             |                               |   |                          |  |  |  |  |  |  |
| is attached hereto  |                             |                               |   |                          |  |  |  |  |  |  |
| OR  |                             |                               |   |                          |  |  |  |  |  |  |
| was filed on (MM/DD/YYYY)  as United States Application Number or PCT International   |                             |                               |   |                          |  |  |  |  |  |  |
| Application Number and was amended on (MM/DD/YYYY) (if applicable).   |                             |                               |   |                          |  |  |  |  |  |  |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as   |                             |                               |   |                          |  |  |  |  |  |  |
| amended by any amendment specifically referred to above.  |                             |                               |   |                          |  |  |  |  |  |  |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.  |                             |                               |   |                          |  |  |  |  |  |  |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. |                             |                               |   |                          |  |  |  |  |  |  |
| Prior Foreign Application   |                             | Foreign Filing Date           | Priority  | Certified Copy Attached? |  |  |  |  |  |  |
| Number(s)   | Country                     | (MM/DD/YYYY)                  | Not Claimed   | YES NO                   |  |  |  |  |  |  |
|   |                             |                               |   |                          |  |  |  |  |  |  |
|   |                             |                               | £ 4.  |                          |  |  |  |  |  |  |
|   |                             |                               |   |                          |  |  |  |  |  |  |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto  |                             |                               |   |                          |  |  |  |  |  |  |
| I hereby claim the benefit under 35 t   | J.S.C. 119(e) of any United | States provisional applicatio | n(s) listed below.  |                          |  |  |  |  |  |  |
| Application Number(s)   | Filing Date                 | (MM/DD/YYYY)                  |   |                          |  |  |  |  |  |  |
| 60/166,152  | 11/17/1999                  |                               | Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |                          |  |  |  |  |  |  |
| 60/154,630  | 09/17/1999                  |                               |   |                          |  |  |  |  |  |  |
|   |                             |                               |   |                          |  |  |  |  |  |  |

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

PTO/SB/01 (12-97)
his box 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a

## **DECLARATION**—Utility or Design Patent Application

| America, listed to application in the   | elow and,<br>manner pr | under 35 U.S.C. 12<br>insofar as the sub<br>ovided by the first p<br>available between | oject mat<br>paragrapi | ter of each of the<br>n of 35 U.S.C. 112 | e claims of the | nis application<br>lge the duty to | n is not<br>disclo | t disclosed<br>se informati | in the proof on which               | ior Unite | ed States or PC1<br>rial to patentability | International |  |
|---|------------------------|--|------------------------|--|---|------------------------------------|--------------------|-----------------------------|-------------------------------------|-----------|---|---------------|--|
| U.S. Parent Application or PCT Parent   |                        |  |                        | Parent Filing Date P                     |   |                                    | Pare               | Parent Patent Number        |                                     |           |   |               |  |
|   | Number                 |  |                        |  |   | (MM/DD                             | /YYY               | Y)                          |                                     |           | (if applicable                            | )             |  |
|   |                        |  |                        |  |   |                                    |                    |                             |                                     |           |   |               |  |
| Additional L  | J.S. or PCT            | international applic   | ation nur              | nbers are listed o                       | n a suppleme  | ntal priority da                   | ata shee           | et PTO/SB/0                 | 02B attac                           | hed here  | eto.                                      |               |  |
| As a named inventor, I hereby appoint the following registered practitioner(s) to prosecu |                        |  |                        |  |   |                                    |                    |                             |                                     |           |   |               |  |
| •   |                        |  |                        | Customer Number OR                       | er  |                                    |                    |                             | → Place Customer<br>Number Bar Code |           |   |               |  |
|   |                        |  |                        | Registered practi                        |   | e/registration r                   | number             | listed belov                | w                                   |           | Label here                                |               |  |
|   | Name                   | e  |                        | Registration<br>Number                   |   |                                    | Name               |                             |                                     |           | Registration<br>Number                    |               |  |
| John Dana Hubbard   |                        |  | 30,465                 | 0,465 Tir                                |   |                                    | J. King            |                             | 38,204                              |           |   |               |  |
| Additional re   | gistered pr            | actitioner(s) named  | on supp                | emental Register                         | ed Practitione  | r Information s                    | sheet P            | TO/SB/02C                   | attached                            | hereto.   |   |               |  |
| Direct all corres   | pondence               |  | Custome<br>Bar Code    | er Number or<br>e Label                  |   |                                    |                    | OR                          | c                                   | orrespoi  | ndence address                            | s below       |  |
| Name  | John D                 | Dana Hubbard 25182   |                        |  |   |                                    |                    |                             |                                     |           |   |               |  |
| Address   | Millipo                | ore Corporation PATENT TRADEMARK OFFICE  |                        |  |   |                                    |                    |                             |                                     |           |   |               |  |
| Address   | 80 Ash                 | by Road  |                        |  | <u> </u>  | 1                                  |                    |                             |                                     | 1         |   |               |  |
| City  | Bedfor                 | rd   |                        |  |   | State                              | State MA ZIP 0173  |                             |                                     |           | 30  |               |  |
| Country   | US                     |  |                        | Telephone                                | Telephone 781-533-2152 Fax 781-533-3125   |                                    |                    |                             |                                     | 533-3125  |   |               |  |
| further that these  | statements             | tements made here<br>s were made with the<br>rillful false statemen                    | ne knowle              | edge that willful fa                     | lse statement   | s and the like                     | so mad             | de are punis                | hable by                            |           |   |               |  |
| Name of Sole or First Inventor:   |                        |  |                        |  | A petition has been filed for this unsigned inventor  |                                    |                    |                             |                                     |           |   |               |  |
| Given Name (first and middle [if any])  |                        |  |                        | Family Name or Surname                   |   |                                    |                    |                             |                                     |           |   |               |  |
| Wilson 2 /2 /2  |                        |  |                        | MOYA                                     |   |                                    |                    |                             |                                     |           |   |               |  |
| Inventor's<br>Signature   |                        |  |                        |  | Date  |                                    |                    |                             |                                     | Date      | 9/12/00                                   |               |  |
| Residence: City Concord   |                        | State  | MA                     | Country                                  | , 1   | US                                 |                    |                             | Citizenship                         | US        |   |               |  |
| Post Office Ad  | dress                  | 38 Hawthorn  | e Villa                | ige                                      |   |                                    |                    |                             |                                     |           |   |               |  |
| Post Office Address   |                        |  |                        |  |   | <del></del>                        |                    |                             |                                     |           |   |               |  |
| City  | Concord State          |  | MA                     | ZIP                                      | 01742   | 12 Country                         |                    | ntry                        | US                                  |           |   |               |  |
| Additional in   | wentore s              | re heing named   | on the                 | 6117                                     | onlemental A  | Additional In                      | ventor             | (s) sheet(s                 | s) PTO/                             | SB/024    | attached heret                            | 0             |  |